



# Metabolic Screening Implementation

Metabolic Screening Policy and Implementation 101 Training  
> Documenting in Excel  
July 27, 2016

# Training Agenda



- Population Prevalence
- Metabolic Screening Policy
- Metabolic Screening Data
  - Data Collection → Data Entry → Data Submission
- Metabolic Screening Reports
- Resources

# What is Metabolic Syndrome?

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- Metabolic syndrome is a group of metabolic risk factors that exist in one person.
- Presenting with a combination of these factors increases the likelihood of developing cardiovascular disease.
- Some of the underlying causes of this syndrome that give rise to the metabolic risk factors include:
  - being overweight or obese
  - having insulin resistance
  - being physically inactive
  - genetic factors



# How is Metabolic Syndrome Diagnosed?

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- Metabolic syndrome occurs when a person has at least three of the following measurements:
  - Abdominal obesity (**waist circumference** of 40 inches or above in men, and 35 inches or above in women)
  - **Triglyceride level** of 150 milligrams per deciliter of blood (mg/dL) or greater
  - **HDL cholesterol** of less than 40 mg/dL in men or less than 50 mg/dL in women
  - Systolic **blood pressure** (top number) of 130 millimeters of mercury (mm Hg) or greater, or diastolic blood pressure (bottom number) of 85 mm Hg or greater
  - Fasting **glucose** of 100 mg/dL or greater

# Population Prevalence

# Early Implementation

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- Metabolic Syndrome Screenings (MBS) were first introduced in Feb. 2010 in DMH Community Psychiatric Rehab Programs
  - CPR clients taking antipsychotic medication
- MBS policy expanded to Disease Management 3700 enrollees
- Continued to be integrated as a best practice with Healthcare Home and ADA Disease Management programs





# The Reason | **Premature Mortality**

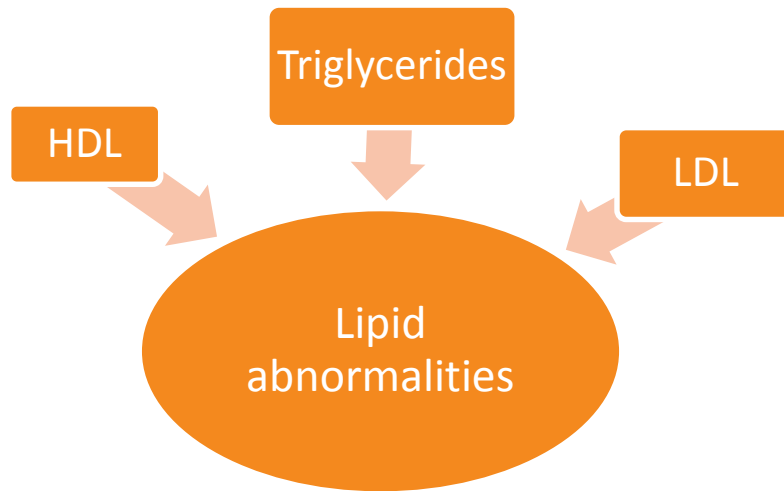
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- Our behavioral health population dies on average 25 years earlier than the general population.
  - Cause of death is due to **preventable medical diseases** such as cardiovascular disease, diabetes, respiratory diseases, and infectious diseases.

**Preventable = Modifiable Risk Factors**



# The Reason | **Modifiable Risk Factors**



## Prevention Of/ Management Of

Diabetes

Hypertension

Metabolic  
Syndrome

- ✓ Access to and/or utilization of medical care
- ✓ Adherence to therapies

- ✓ Physical Activity
- ✓ Tobacco Cessation



# The Reason | CATIE Study

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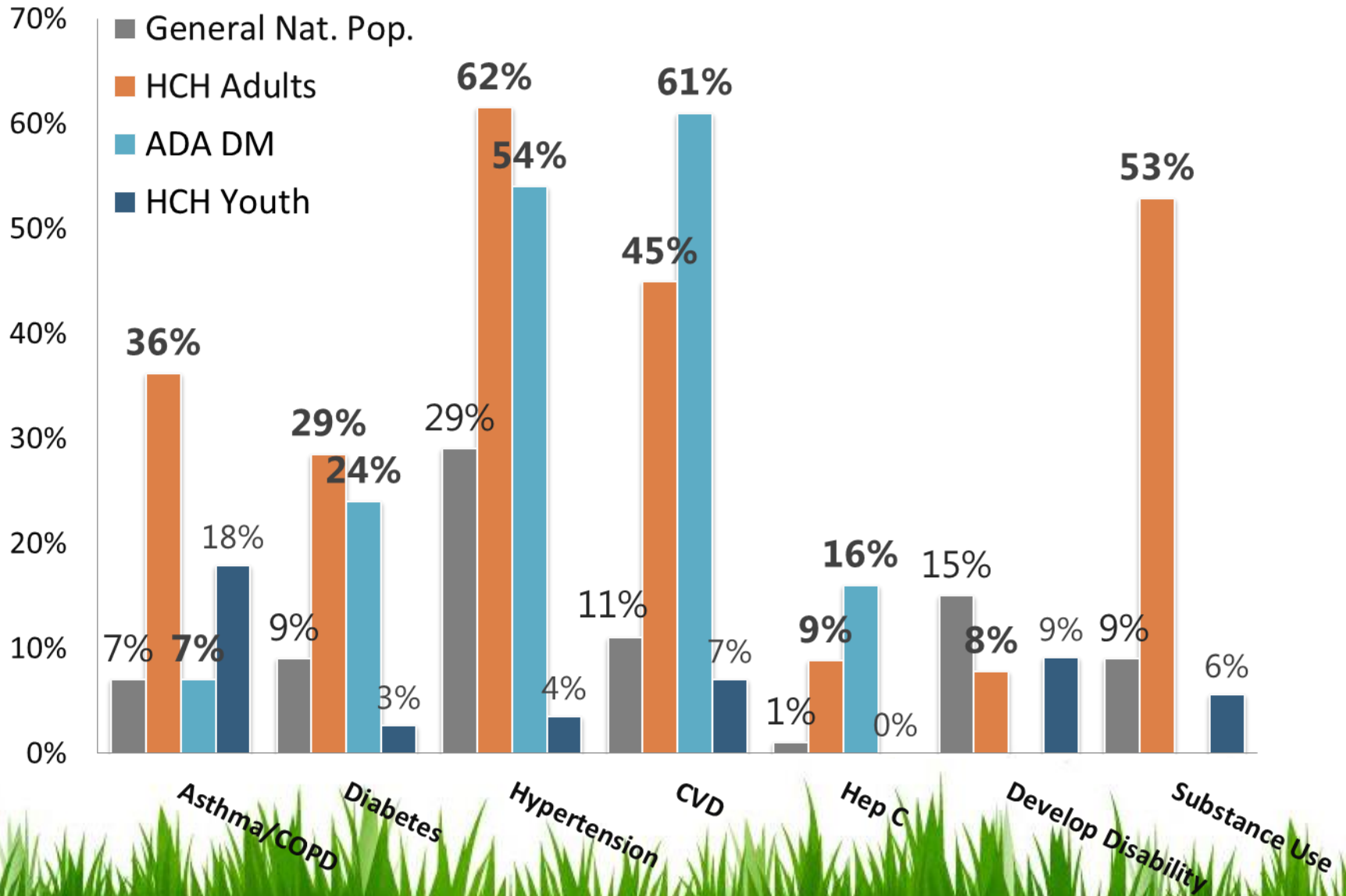
At baseline investigators found that:

- **88.0%** of subjects had **dyslipidemia**
- **62.4%** of subjects had **hypertension**
- **30.2%** of subjects had **diabetes**

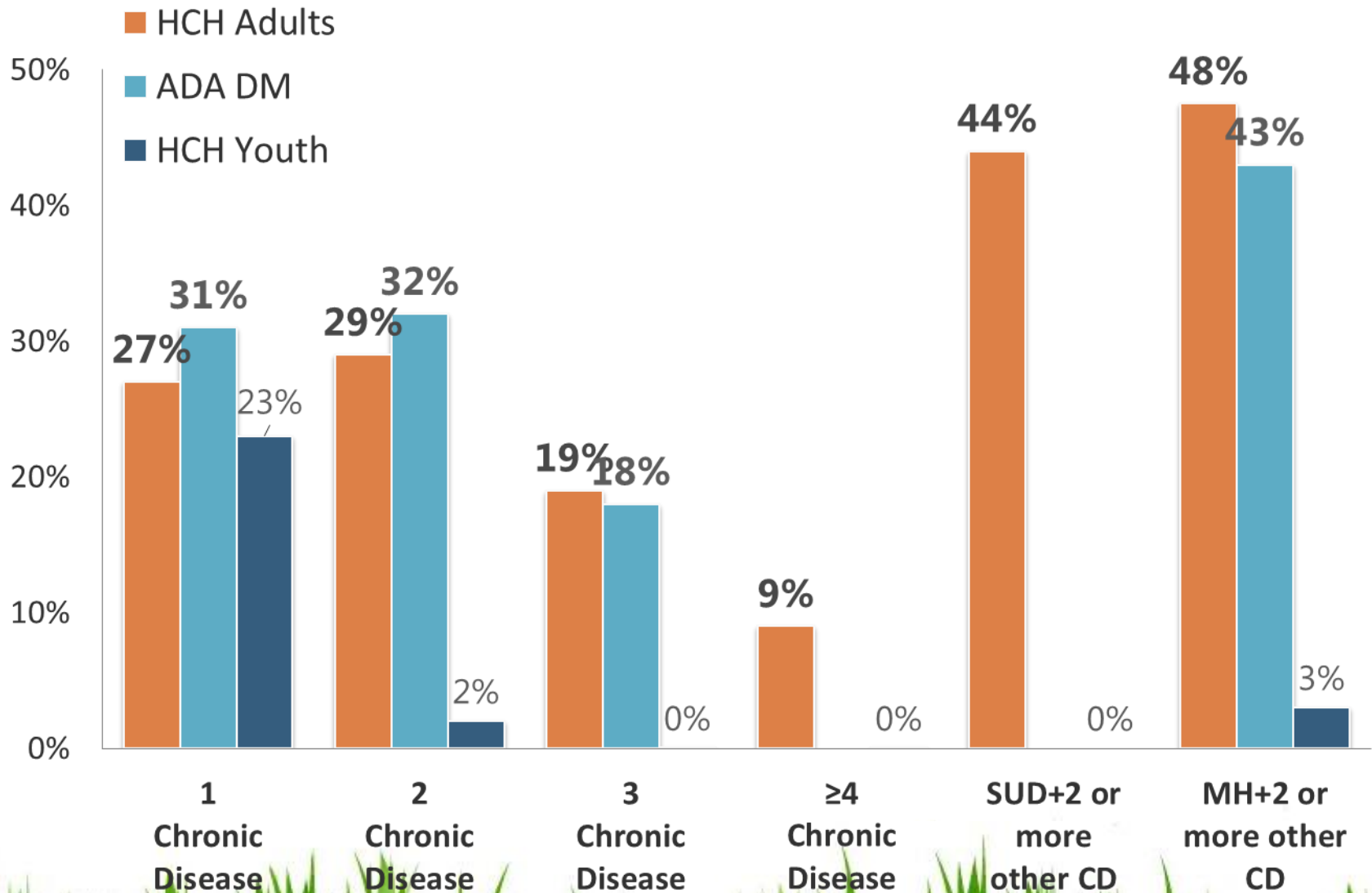
**were NOT receiving treatment!**



# Prevalence | DMH Populations Served



# Prevalence | DMH Populations Served





# Metabolic Screening Policy

# DMH MBS Policy | [ADA DM Program](#)

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- Annual complete MBS required for all ADA DM enrollees starting August 1, 2016.
- All MBS required data elements must be collected and reported to the state reporting system.
  - CMT's ProAct online system OR
  - Excel data file submitted to CMT



# Requirements for “Complete” Metabolic

## VITALS

- ✓ Height
- ✓ Weight
- ✓ BMI
- ✓ Blood Pressure
- ✓ Waist Circumference\*  
(optional)

## LAB PANEL

- ✓ Blood Glucose **OR** A1c
- ✓ Lipid Panel
  - ✓ LDL
  - ✓ HDL
  - ✓ Triglycerides
  - ✓ Cholesterol

## RISK FACTORS

- ✓ Status of Antipsychotic Medication Use
- ✓ Status of Tobacco Use
- ✓ Pregnancy Status



# DMH MBS Policy | Cholestech LDX Machine

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- DMH provided funding for each ADA DM program provider to purchase a Cholestech LDX machine start up kit.
- Use of the LDX machine requires a CLIA waiver. DMH has purchased and renews a CLIA waiver that covers all DMH contracted providers.
  - Submit necessary information to Kim Yeagle, Coalition, to keep on file



**Collection → Entry → Submission → Process**

# Metabolic Screening Data



STATE OF MISSOURI  
DEPARTMENT OF MENTAL HEALTH  
**METABOLIC SYNDROME SCREENING AND MONITORING TOOL**

NAME					DOB			
AGENCY					COUNCIL (IF AVAILABLE)			
VITAL HISTORY	Baseline				Subsequent Values			
	Date	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___
	Height (in) _____							
	Weight (lbs)							
	BMI (kg/m <sup>2</sup> )							
	Waist Circumference							
	<b>BMI Monitoring</b> BMI $\geq 25$ - overweight    BMI $\geq 30$ - obese <b>Waist Circumference Monitoring</b> Females $\geq 35"$ or Men $\geq 40"$ within normal limits Females $\geq 35"$ or Men $\geq 40"$ - prediabetic risk factor							
	Baseline				Subsequent Values			
	Date	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___
	Blood Pressure (mmHg)							
Manual/Automated	M/A	M/A	M/A	M/A	M/A	M/A	M/A	
<b>Blood Pressure Monitoring</b> Normal - BP 120/80 and below, Prehypertension - BP 120/80 - 139/89, Hypertension - 140/90 and above								
BLOOD GLUCOSE	Baseline				Subsequent Values			
	Date	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___
	Plasma Glucose (mg/dl)							
	Fasting - Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
	and/or Hgb A1c							
	<b>Fasting Plasma Glucose &amp;/or Hgb A1c</b> FPG $\geq 100$ mg/dl or Hgb A1c $\geq 6.0$ within normal limits FPG 100 - 125 mg/dl is indicative of prediabetes <i>Observe the patient for s/s of diabetes i.e.: wt gain (increase or decrease), polyuria or polydipsia.</i> FPG $\geq 126$ mg/dl or Hgb A1c $\geq 6.1$ indicates diabetic state							
	Baseline				Subsequent Values			
	Date	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___	___/___/___
	Total Cholesterol (mg/dl)							
	LDL (mg/dl)							
HDL (mg/dl)								
Triglycerides (mg/dl)								
<b>Lipid Panel Monitoring</b> LDL $\geq 130$ mg/dl, HDL $\geq 40$ mg/dl &/or Triglycerides $\geq 150$ mg/dl within normal limits LDL $\geq 130$ mg/dl, HDL $\geq 40$ mg/dl &/or Triglycerides $\geq 150$ mg/dl at risk for hyperlipidemia								
Taking antipsychotic?	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N	Y/N
Pregnant?	Y/N/U	Y/N/U	Y/N/U	Y/N/U	Y/N/U	Y/N/U	Y/N/U	Y/N/U
Smoker?	Y/N/U	Y/N/U	Y/N/U	Y/N/U	Y/N/U	Y/N/U	Y/N/U	Y/N/U
Patient refused	Date	___/___/___	Requested order from outside provider				Date	___/___/___
Screeners Initials								

# Answers to the “Tobacco Use” Question

- If the client is using **e-cigarettes**:  
✓ YES
- If the client is using **marijuana or other illegal drugs**:  
✓ NO
- If the client is using **chewing tobacco**:  
✓ YES



## DATA ENTRY DEMO

- ProAct Online System
- or
- **Excel Data File**

# Requirements for “Complete” Metabolic

- **All required** values must be dated in the previous 12 months.
  - When the oldest required valued expires, then the metabolic will not count as complete.
  - Required values recorded as opt out also count as complete.\* (only allowable for lab panel)
- *Waist circumference* is **not** a required value for a “complete” metabolic.
- Answering the pregnancy question is only required when the client is pregnant.
  - CMT will auto populate this question to “NO” unless the status is changed to “YES.”



# Data Entry Clarifications

- The height and weight must have the same date in order for the BMI to auto calculate.
  - The BMI will note *opt out* if different dates are entered for height and weight.
- When collecting either blood glucose or A1c, leave the other test value blank – **do not** document the other test as an *opt out*.
- If you do not collect the waist circumference, then leave it blank – **do not** document waist circumference as an *opt out*.

# Data Entry Clarifications

## MBS Data Entry Parameters

Attribute	Accepted Data Range
Height	25 – 99
Weight	25 – 625
Waist	15 – 85
BP Systolic	40 – 300
BP Diastolic	30 – 200
Blood Glucose	25 – 600
A1c	1 – 30
Cholesterol	0 – 999
LDL	0 – 800
HDL	0 – 500
Triglycerides	0 – 3,000
Date Taken	Current or previous (no future dates)

- When documenting labs that come back as “NA” or “unable to calculate,” record zero for the value and select *unable to calculate* in the record.
- Documenting *unable to calculate* values will also count as complete.

# Data Submission Clarifications

- All Metabolic data submitted on the MBS Data Template (Excel), must be submitted to the CMT FTP site (not DMH FTP) by the close of business on the first working day of the month.
  - Kim Yeagle, Coalition, sends a new MBS Data Template each month.
  - For questions regarding the CMT FTP site, please contact CMT support ([support@cmthealthcare.com](mailto:support@cmthealthcare.com)).

# Data Issues

- Please send any data issues, questions or concerns to CMT support and Kim Yeagle.
- **DON'T FORGET TO PASSWORD PROTECT OR ENCRYPT ANY PHI (DCNs, Client Name, etc.)!**

*CMT Support*

[support@cmthealthcare.com](mailto:support@cmthealthcare.com)

*Kim Yeagle*

Integrated Health Manager, Coalition

[kyeagle@mocoalition.org](mailto:kyeagle@mocoalition.org)

The background of the slide features a blue sky gradient at the top, a green grass field at the bottom, and a stylized, light blue swirl design on the right side. A dark blue rectangular box is positioned in the center, containing the title text.

# Metabolic Screening Reports

# MBS Monthly Reports at a Glance

## METABOLIC SCREENING

- ✓ ***Attribute Completion and Opt Out Report***  
(aggregate report)
- ✓ ***Missing Required Attribute Report*** (per agency)
- ✓ ***30/60 Day Attribute Expiration Report*** (per agency)
- ✓ ***Attribute Error Report*** (per agency, \*only for Excel data entries submitted)

\*Reports will be emailed monthly from the DBH/Coalition team.



# Attribute Completion and Opt Out Report

Metabolic Syndrome Screening Data								
<b>MBS Attribute Completion and Opt Out Report</b>		July 2014						
<ul style="list-style-type: none"> <li>* Report shows MBS attribute data complete and opted out in the previous 12 month.</li> <li>* Report excludes all new HCH enrollees in the previous 90 days.</li> <li>* Report includes all data reported as of the last day of the reporting month.</li> <li>* "No Data" includes no values on file and values with dates older than 12 months.</li> <li>* Opt out values also count as 'complete' towards the total Metabolic Screening completion measure.</li> </ul>								
		Height						
Agency	Total HCH Clients	N Complete	% Complete	N Opt Out	% Opt Out	N No Data	% No Data	N
Adapt of Missouri, Inc.	409	316	77%	2	0.0%	91	22%	
BJC Behavioral Health- SE	563	501	89%	2	0.0%	60	11%	
BJC Behavioral Health- SL	1279	892	70%	4	0.0%	383	30%	
Bootheel Counseling Services	626	493	79%	35	6.0%	98	16%	
Burrell Behavioral Health - Springfield	1360	1190	88%	9	1.0%	161	12%	
Burrell Behavioral Health- Central	733	692	94%	13	2.0%	28	4%	
Clark Community Mental Health Center	269	236	88%	7	3.0%	26	10%	
Community Counseling Center	674	509	76%	14	2.0%	151	22%	
Community Treatment, Inc.	342	292	85%	1	0.0%	49	14%	
Comprehensive Health Systems, Inc.	172	163	95%	0	0.0%	9	5%	
Comprehensive Mental Health Services	392	352	90%	3	1.0%	37	9%	
Crider Health Center, Inc.	1000	827	83%	59	6.0%	114	11%	
East Central Missouri Behavioral Health Services	341	307	90%	1	0.0%	33	10%	
Family Counseling Center	941	805	86%	2	0.0%	134	14%	
Family Guidance Center	597	484	81%	58	10.0%	55	9%	
Hopewell Center	504	434	86%	4	1.0%	66	13%	
Independence Center	249	216	87%	3	1.0%	30	12%	
Mark Twain Behavioral Health	385	300	78%	16	4.0%	69	18%	
New Horizons Community Support Services	327	310	95%	13	4.0%	4	1%	
North Central Missouri Mental Health Center	346	297	86%	0	0.0%	49	14%	
Ozark Center	562	485	86%	6	1.0%	71	13%	
Ozark Medical Center	252	206	82%	3	1.0%	43	17%	
Pathways Community Behavioral Healthcare, Inc.	2592	2158	83%	21	1.0%	413	16%	
Places for People	376	288	77%	19	5.0%	69	18%	
Preferred Family Healthcare, Inc.	333	321	96%	0	0.0%	12	4%	
ReDiscover	761	598	79%	3	0.0%	160	21%	
Swope Health Services	506	458	91%	10	2.0%	38	8%	
Tri-County Mental Health Services	362	337	93%	1	0.0%	24	7%	
Truman Medical Center Behavioral Health	589	517	88%	4	1.0%	68	12%	
<b>Statewide</b>	<b>17842</b>	<b>14984</b>	<b>84%</b>	<b>313</b>	<b>1.8%</b>	<b>2545</b>	<b>14%</b>	

# Missing Required Attribute Report



## [Your Agency] Missing Required Attribute Report 201504

PatientID	FirstName	LastName	CMHCName	Missing Attribute	LastValueRecorded	DateofLastValue
12345678	Jane	Doe	Your Agency Name Here	Triglycerides	101	1/22/2013
12345678	Jane	Doe	Your Agency Name Here	HDL	65	1/22/2013
12345678	Jane	Doe	Your Agency Name Here	LDL	44	1/22/2013
12345678	Jane	Doe	Your Agency Name Here	TotalCholesterol	129	1/22/2013
23456789	John	Smith	Your Agency Name Here	BPSystolic	126	4/25/2014
23456789	John	Smith	Your Agency Name Here	Triglycerides	101	4/25/2014
23456789	John	Smith	Your Agency Name Here	HA1C	5	4/25/2014
23456789	John	Smith	Your Agency Name Here	HDL	36	4/25/2014
23456789	John	Smith	Your Agency Name Here	BloodGlucose	70	4/25/2014
23456789	John	Smith	Your Agency Name Here	TotalCholesterol	163	4/25/2014
23456789	John	Smith	Your Agency Name Here	BPDiastolic	80	4/25/2014
23456789	John	Smith	Your Agency Name Here	LDL	107	4/25/2014
23456789	John	Smith	Your Agency Name Here	AntipsychoticUse	Yes	4/25/2014
34567891	Bob	Johnson	Your Agency Name Here	TotalCholesterol	143	1/17/2014
34567891	Bob	Johnson	Your Agency Name Here	LDL	60	1/17/2014
34567891	Bob	Johnson	Your Agency Name Here	BloodGlucose	119	1/17/2014
34567891	Bob	Johnson	Your Agency Name Here	HDL	56	1/17/2014
34567891	Bob	Johnson	Your Agency Name Here	HA1C	Opted Out	1/17/2014
34567891	Bob	Johnson	Your Agency Name Here	Triglycerides	133	1/17/2014

# 30/60 Day Attribute Expiration Report



## [Your Agency] Patient Required Attributes Expiring 201504

Report Run Date: 2015-05-07

Agency	PatientId	Patient First name	Patient Last Name	Is CMHC HCH member?	Attribute Name	Latest Attribute Date Taken	Expires on	Last Value Recorded
Your Agency Name Here	12345678	Jane	Doe	Y	BPSystolic	6/25/2014	6/25/2015	122
Your Agency Name Here	12345678	Jane	Doe	Y	HDL	6/25/2014	6/25/2015	50
Your Agency Name Here	12345678	Jane	Doe	Y	BPDiastolic	6/25/2014	6/25/2015	81
Your Agency Name Here	12345678	Jane	Doe	Y	AntipsychoticUse	6/25/2014	6/25/2015	Y
Your Agency Name Here	12345678	Jane	Doe	Y	HA1C	6/25/2014	6/25/2015	Opt out
Your Agency Name Here	12345678	Jane	Doe	Y	Height	6/25/2014	6/25/2015	65
Your Agency Name Here	12345678	Jane	Doe	Y	TotalCholesterol	6/25/2014	6/25/2015	249
Your Agency Name Here	12345678	Jane	Doe	Y	Weight	6/25/2014	6/25/2015	215
Your Agency Name Here	12345678	Jane	Doe	Y	BloodGlucose	6/25/2014	6/25/2015	154
Your Agency Name Here	12345678	Jane	Doe	Y	LDL	6/25/2014	6/25/2015	152
Your Agency Name Here	12345678	Jane	Doe	Y	Smoker	6/25/2014	6/25/2015	No
Your Agency Name Here	12345678	Jane	Doe	Y	Triglycerides	6/25/2014	6/25/2015	234
Your Agency Name Here	23456789	John	Smith	Y	HDL	6/26/2014	6/26/2015	35
Your Agency Name Here	23456789	John	Smith	Y	LDL	6/26/2014	6/26/2015	106
Your Agency Name Here	23456789	John	Smith	Y	Triglycerides	6/26/2014	6/26/2015	232
Your Agency Name Here	23456789	John	Smith	Y	TotalCholesterol	6/26/2014	6/26/2015	187
Your Agency Name Here	23456789	John	Smith	Y	HA1C	6/26/2014	6/26/2015	5.1
Your Agency Name Here	34567891	Bob	Johnson	N	BloodGlucose	6/5/2014	6/5/2015	113
Your Agency Name Here	34567891	Bob	Johnson	N	BPSystolic	6/5/2014	6/5/2015	114
Your Agency Name Here	34567891	Bob	Johnson	N	LDL	6/17/2014	6/17/2015	93
Your Agency Name Here	34567891	Bob	Johnson	N	Height	6/5/2014	6/5/2015	72
Your Agency Name Here	34567891	Bob	Johnson	N	TotalCholesterol	6/17/2014	6/17/2015	153
Your Agency Name Here	34567891	Bob	Johnson	N	HDL	6/17/2014	6/17/2015	43
Your Agency Name Here	34567891	Bob	Johnson	N	BPDiastolic	6/5/2014	6/5/2015	76
Your Agency Name Here	34567891	Bob	Johnson	N	Smoker	6/17/2014	6/17/2015	Yes
Your Agency Name Here	34567891	Bob	Johnson	N	AntipsychoticUse	6/17/2014	6/17/2015	Y
Your Agency Name Here	34567891	Bob	Johnson	N	Triglycerides	6/17/2014	6/17/2015	85
Your Agency Name Here	34567891	Bob	Johnson	N	Weight	6/5/2014	6/5/2015	193
Your Agency Name Here	34567891	Bob	Johnson	N	HA1C	6/5/2014	6/5/2015	6.6

# Attribute Error Report

## Attribute Error Report

PatientID	CMHC Name	Attribute Error
123456789	Your Agency Name Here	PatientID not in Patient table
123456790	Your Agency Name Here	PatientID not in Patient table
123456791	Your Agency Name Here	PatientID not in Patient table
123456792	Your Agency Name Here	HA1C does not fit parameters: 0
123456793	Your Agency Name Here	PatientID not in Patient table
123456794	Your Agency Name Here	PatientID not in Patient table
123456795	Your Agency Name Here	Blood Glucose does not fit parameters: 0.00
123456796	Your Agency Name Here	Blood Glucose does not fit parameters: 0.00
123456797	Your Agency Name Here	Blood Glucose does not fit parameters: 0.00
123456798	Your Agency Name Here	HA1C does not fit parameters: 0
123456799	Your Agency Name Here	Blood Glucose does not fit parameters: 0.00
123456800	Your Agency Name Here	Waist does not fit parameters: 0
123456801	Your Agency Name Here	PatientID not in Patient table
123456802	Your Agency Name Here	PatientID not in Patient table
123456803	Your Agency Name Here	Blood Glucose does not fit parameters: 0.00
123456804	Your Agency Name Here	Waist does not fit parameters: 0
123456805	Your Agency Name Here	Waist does not fit parameters: 0
123456806	Your Agency Name Here	PatientID not in Patient table



# Resources and Supports



# Resources

- DMH ADA DM Metabolic Syndrome Screening Policy
  - [http://dmh.mo.gov/ada/docs/clinical35ada\\_dm\\_metabolic\\_syndrome\\_screening.pdf](http://dmh.mo.gov/ada/docs/clinical35ada_dm_metabolic_syndrome_screening.pdf)
- Missouri Wellness website > [www.wellmissouri.com](http://www.wellmissouri.com)
  - Disease Management Log-In Page



The screenshot shows the Missouri Wellness website. At the top left is a logo with an apple and the text 'HEALTHY BODY MIND WELLNESS'. The main title 'Missouri Wellness' is in large green letters. Below it is a navigation bar with links: HOME, RESOURCE LIBRARY, WELLNESS COACHING LOGIN, DISEASE MANAGEMENT (highlighted with a blue arrow), HEALTHCARE HOME, MHCPP, and COLLABORATIVE. Below the navigation bar is a section titled 'DISEASE MANAGEMENT' with a sub-link 'DISEASE MANAGMENT | Log-In' circled in blue. At the bottom, there is a paragraph of text about the Disease Management Project.

The Disease Management Project began as a two year initiative in November, 2010 between the Department of Mental Health (DMH) and the MO HealthNet Division (MHD). The project targets high cost Medicaid recipients who have severe mental illness (SMI) and impactable chronic medical conditions. It is typically referenced as DM 3700 because that was the target number of individuals in the first cohort. These services and interventions have reduced costs to the state for providing care and treatment and have greatly improved outcomes for the identified clients. As a result of the success of the program, disease management was expanded in 2014 to individuals with high medical costs, chronic medical conditions, and substance use disorders (referenced as ADA Disease Management or ADA DM). Providers contracted with DMH have agreed to contact these identified individuals, provide outreach and engagement, enroll them in the Community Psychiatric Rehabilitation (CPR) Program and/or Comprehensive Substance Treatment and Rehabilitation (CSTAR) Program, and provide necessary services with an emphasis on community support/case management to coordinate and manage their medical, psychiatric, and substance use conditions.

1. Click the **Log-In** link
2. Enter the **password**: management!
3. Access many **resources** from the state and other disease management teams





# Coordination Templates

- Missouri Wellness website > [www.wellmissouri.com](http://www.wellmissouri.com)
  - Disease Management Log-In Page
- These templates were drafted for DMH agencies to use with clients and staff as they implement the metabolic screening. Any of the materials can be modified to the extent the agency would like to use them.
  - Metabolic Screening Patient Flyer
  - Metabolic Screening Participant Form (optional)
  - Metabolic Screening Client Results for Adult and Child
  - Metabolic Screening Fax Referral Letter to Primary Care Providers

## pre-diabetes **SCREENING RESULTS**

Congratulations, \_\_\_\_\_ on taking  
an important step to managing your health care!

A qualified nurse will help you understand the results of your labs completed on

(date)

Your Height is _____ (inches) Weight is _____ (pounds)	<ul style="list-style-type: none"><li>* If your BMI is under 25, you should be monitored 4 times a year.</li><li>* If your BMI is over 25, then please make an appointment with your primary care physician for education on weight management and exercise.</li></ul>
Your Waist Circumference is _____ (inches)	<ul style="list-style-type: none"><li>* Men with a waist circumference under 40, and women under 35, should be monitored 4 times a year.</li><li>* If your waist circumference is over 40 for men or over 35 for women, then please make an appointment with your primary care physician for education on weight management and exercise.</li></ul>
Your Blood Pressure is _____	<ul style="list-style-type: none"><li>* If your blood pressure is below 130/85, then you should be monitored 1 time a year.</li><li>* If your blood pressure is above 130/85, then please make an appointment with your primary care physician for follow up care.</li></ul>
Your Fasting blood sugar is _____	<ul style="list-style-type: none"><li>* If your fasting blood sugar is below 100, then you should be monitored 1 time a year.</li><li>* If your fasting blood sugar is between 100 and 125, you will need to be monitored 4 times a year.</li><li>* If your fasting blood sugar is above 125, then please make an appointment with your primary care physician for follow up care.</li></ul>
Your Lipid Panel Results are: Total Cholesterol _____ Triglycerides _____ LDL _____	<ul style="list-style-type: none"><li>* If your LDL is below 130, HDL above 40 and Triglycerides below 150, then you should be monitored 1 time a year.</li><li>* If your LDL is above 130, HDL is below 40 and Triglycerides are above 150, then please make an appointment with your primary care physician for follow up care.</li></ul>

# Contacts

## DMH, Division of Behavioral Health

Tara Crawford | [tara.crawford@dmh.mo.gov](mailto:tara.crawford@dmh.mo.gov)

Natalie Fornelli | [natalie.fornelli@dmh.mo.gov](mailto:natalie.fornelli@dmh.mo.gov)



## Missouri Coalition for Community Behavioral Healthcare

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Rachelle Glavin | [rglavin@mocoalition.org](mailto:rglavin@mocoalition.org)

## Care Management Technologies (CMT)

Support | [support@cmthealthcare.com](mailto:support@cmthealthcare.com)

